

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

FRIENDS OF JIM EVANS

ADDRESS (number and street)

6271 S FARM ROAD 67

☐ Check if different
than previously
reported. (ACC)

REPUBLIC

MO

65738

2. FEC IDENTIFICATION NUMBER ▼

C C00551564

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

MO

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

25

Y Y Y Y

2014

through

M M / D D / Y Y Y Y

09

D D / Y Y Y Y

30

Y Y Y Y

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Shirley Huffman

Signature of Treasurer

Shirley Huffman

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10

D D / Y Y Y Y

05

Y Y Y Y

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

FRIENDS OF JIM EVANS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	16587.00	39416.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	16587.00	39416.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	15722.58	40726.04
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	15722.58	40726.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	43689.96	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	45000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 20

Write or Type Committee Name

FRIENDS OF JIM EVANS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

10800.00

18280.00

(ii) Unitemized.....

5787.00

16956.00

(iii) TOTAL of contributions from individuals ▶

16587.00

35236.00

(b) Political Party Committees.....

0.00

2500.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

1680.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

16587.00

39416.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

45000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

45000.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ▶

16587.00

84416.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 20

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	15722.58	40726.04
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	15722.58	40726.04

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	42825.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16587.00
25. SUBTOTAL (add Line 23 and Line 24).....	59412.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15722.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	43689.96

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS OF JIM EVANS

A. Full Name (Last, First, Middle Initial) Joe & Carolyn Boatright			Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2014		
Mailing Address 11492 W State Hwy 174			Transaction ID : SA11AI.5024		
City	State	Zip Code	Amount of Each Receipt this Period		
Republic	MO	65738	1000.00		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period		
Name of Employer N/A		Occupation Not Employed	1000.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	1000.00		
B. Full Name (Last, First, Middle Initial) H Mariel Caldwell			Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2014		
Mailing Address 3526 S Welwood			Transaction ID : SA11AI.5045		
City	State	Zip Code	Amount of Each Receipt this Period		
Springfield	MO	65804	500.00		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period		
Name of Employer N/A		Occupation Not Employed	500.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	500.00		
C. Full Name (Last, First, Middle Initial) Democratic Alliance Springfield Missouri			Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2014		
Mailing Address 803 W Farm Road 68			Transaction ID : SA11AI.4991		
City	State	Zip Code	Amount of Each Receipt this Period		
Springfield	MO	65803	360.00		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period		
Name of Employer		Occupation	360.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 360.00	360.00		
SUBTOTAL of Receipts This Page (optional).....			1860.00		
TOTAL This Period (last page this line number only).....			1860.00		

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

James Evans

Mailing Address 6271 S Farm Road 67

City

Republic

State

MO

Zip Code

65738

FEC ID number of contributing
federal political committee.

C H2MO07093

Name of Employer

N/A

Occupation

Not Employed

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

46705.00

Date of Receipt

M M / D D / Y Y Y Y
07 26 2014

Transaction ID : SA11AI.4910

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

James Evans

Mailing Address 6271 S Farm Road 67

City

Republic

State

MO

Zip Code

65738

FEC ID number of contributing
federal political committee.

C H2MO07093

Name of Employer

N/A

Occupation

Not Employed

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

46730.00

Date of Receipt

M M / D D / Y Y Y Y
08 26 2014

Transaction ID : SA11AI.4967

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

James Evans

Mailing Address 6271 S Farm Road 67

City

Republic

State

MO

Zip Code

65738

FEC ID number of contributing
federal political committee.

C H2MO07093

Name of Employer

N/A

Occupation

Not Employed

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

46755.00

Date of Receipt

M M / D D / Y Y Y Y
09 26 2014

Transaction ID : SA11AI.5076

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

75.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF JIM EVANS

A. Jack Hembree Full Name (Last, First, Middle Initial) Mailing Address 2327 Rosebrier City Springfield State MO Zip Code 65804 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation NOT EMPLOYED Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 220.00			Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2014 Transaction ID : SA11AI.5169 Amount of Each Receipt this Period 100.00 In-kind - Buttons
B. Joe Hooper Full Name (Last, First, Middle Initial) Mailing Address 1045 E Division ST City Springfield State MO Zip Code 65803 FEC ID number of contributing federal political committee. C Name of Employer ANPAC Occupation analyst Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 350.00			Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014 Transaction ID : SA11AI.4919 Amount of Each Receipt this Period 50.00
C. Joe Hooper Full Name (Last, First, Middle Initial) Mailing Address 1045 E Division ST City Springfield State MO Zip Code 65803 FEC ID number of contributing federal political committee. C Name of Employer ANPAC Occupation analyst Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 400.00			Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2014 Transaction ID : SA11AI.5001 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional).....			200.00
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

Shirley Huffman

A.

Mailing Address 3331 S Farm Rd 187

City

Springfield

State

MO

Zip Code

65809

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		20		2014

Transaction ID : SA11AI.5093

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Elizabeth Kurtz

B.

Mailing Address 321 E. Lafayette

City

Springfield

State

MO

Zip Code

65810

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Not employed

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		25		2014

Transaction ID : SA11AI.4795

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Elizabeth Kurtz

C.

Mailing Address 321 E. Lafayette

City

Springfield

State

MO

Zip Code

65810

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Not employed

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		28		2014

Transaction ID : SA11AI.5184

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

625.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 20
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF JIM EVANS

A. Full Name (Last, First, Middle Initial) Bill Lennon			Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2014		
Mailing Address 229 Country Bluff			Transaction ID : SA11AI.5151		
City	State	Zip Code	Amount of Each Receipt this Period 1200.00		
Branson	MO	65616	In-kind - Music ad		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 2400.00		
Name of Employer Self		Occupation Singer	Election Cycle-to-Date 2400.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
B. Full Name (Last, First, Middle Initial) Brandi L O'Reilly			Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2014		
Mailing Address 912 Stockton Dr			Transaction ID : SA11AI.5016		
City	State	Zip Code	Amount of Each Receipt this Period 2600.00		
Clever	MO	65631			
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 2600.00		
Name of Employer Ozark Therapy Institute		Occupation Pediatric Physical Therapist	Election Cycle-to-Date 2600.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)					
C. Full Name (Last, First, Middle Initial) Charlie O'Reilly			Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014		
Mailing Address 1898 N Monet			Transaction ID : SA11AI.5175		
City	State	Zip Code	Amount of Each Receipt this Period 1500.00		
Nixa	MO	65714	Donation		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 2500.00		
Name of Employer Self		Occupation Retired	Election Cycle-to-Date 2500.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)					
SUBTOTAL of Receipts This Page (optional).....			5300.00		
TOTAL This Period (last page this line number only).....					

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

Ryan O'Reilly

Mailing Address 2831 Ingram Mill Rd

City

Springfield

State

MO

Zip Code

65804

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2014

Transaction ID : SA11AI.5011

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Michael Scriven

Mailing Address 1325 North Ethyl

City

Springfield

State

MO

Zip Code

65802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Springfield Greene County Libr

Occupation

Circulation Assistant

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2014

Transaction ID : SA11AI.4838

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

Michael Scriven

Mailing Address 1325 North Ethyl

City

Springfield

State

MO

Zip Code

65802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Springfield Greene County Libr

Occupation

Circulation Assistant

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2014

Transaction ID : SA11AI.4961

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2610.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

Michael Scriven

A.

Mailing Address 1325 North Ethyl

City

Springfield

State

MO

Zip Code

65802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Springfield Greene County Libr

Occupation

Circulation Assistant

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

Transaction ID : SA11AI.4994

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Michael Scriven

B.

Mailing Address 1325 North Ethyl

City

Springfield

State

MO

Zip Code

65802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Springfield Greene County Libr

Occupation

Circulation Assistant

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Transaction ID : SA11AI.5073

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

Joyce Wise

C.

Mailing Address 4741 S Stewart

City

Springfield

State

MO

Zip Code

65804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

N/A

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.5187

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

130.00

10800.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

A. Best Buy

Mailing Address #54

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		31		2014

City	State	Zip Code
Springfield	MO	65804

Purpose of Disbursement
Computer

006

Category/
Type

Candidate Name

FRIENDS OF JIM EVANS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO District: 07

Amount of Each Disbursement this Period

660.63

Transaction ID : SB17.5130

B. B Publishing Group

Mailing Address P.O. Box 2418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2014

City	State	Zip Code
Springfield	MO	65801

Purpose of Disbursement
Advertisement

004

Category/
Type

Candidate Name

FRIENDS OF JIM EVANS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO District: 07

Amount of Each Disbursement this Period

355.00

Transaction ID : SB17.4860

c. B Publishing Group

Mailing Address P.O. Box 2418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2014

City	State	Zip Code
Springfield	MO	65801

Purpose of Disbursement
Free Press Ad

004

Category/
Type

Candidate Name

FRIENDS OF JIM EVANS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO District: 07

Amount of Each Disbursement this Period

302.84

Transaction ID : SB17.5180

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1318.47

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

A. Double Tree Hotel

Mailing Address N Glenstone

City	State	Zip Code
Springfield	MO	65804

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

366.27

Transaction ID : SB17.5109

B. Double Tree Hotel

Mailing Address N Glenstone

City	State	Zip Code
Springfield	MO	65804

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2014

Amount of Each Disbursement this Period

130.20

Transaction ID : SB17.5136

c. Face Book

Mailing Address 156 University

City	State	Zip Code
Palo Alto	CA	94301

Purpose of Disbursement
Advertisement

Candidate Name

FRIENDS OF JIM EVANS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO

District: 07

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		17		2014

Amount of Each Disbursement this Period

508.68

Transaction ID : SB17.5160

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1005.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

A. Face Book

Mailing Address 156 University

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

City	State	Zip Code
Palo Alto	CA	94301

Amount of Each Disbursement this Period

367.84

Purpose of Disbursement
Advertisement

004

Transaction ID : SB17.5158

Candidate Name

FRIENDS OF JIM EVANSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO

District: 07

Full Name (Last, First, Middle Initial)

B. Virgil Hill

Mailing Address 2013 W Water St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

City	State	Zip Code
Springfield	MO	65806

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Consulting

001

Transaction ID : SB17.5154

Candidate Name

FRIENDS OF JIM EVANSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO

District: 07

Full Name (Last, First, Middle Initial)

C. Virgil Hill

Mailing Address 2013 W Water St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2014

City	State	Zip Code
Springfield	MO	65806

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Consulting

001

Transaction ID : SB17.5153

Candidate Name

FRIENDS OF JIM EVANSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO

District: 07

SUBTOTAL of Disbursements This Page (optional).....

2367.84

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

A. Bill Lennon

Mailing Address 229 Country Bluff

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2014

City	State	Zip Code
Branson	MO	65616

Amount of Each Disbursement this Period

1200.00

Purpose of Disbursement
In-kind - Music adCategory/
Type**Transaction ID : SB17.5152**

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Palmisano Mkt

Mailing Address 3387 Farm Road 186

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2014

City	State	Zip Code
Rogersville	MO	65742

Amount of Each Disbursement this Period

6000.00

Purpose of Disbursement
Radio ads

004

Category/
Type**Transaction ID : SB17.5097**

Candidate Name

FRIENDS OF JIM EVANS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: MO District: 07

Full Name (Last, First, Middle Initial)

c. Angela & david Pryor

Mailing Address 1420 S kings Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2014

City	State	Zip Code
Springfield	MO	65807

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Campaign Organization Consultation

001

Category/
Type**Transaction ID : SB17.4884**

Candidate Name

FRIENDS OF JIM EVANS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO District: 07

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8200.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

A. Sonic Print

Mailing Address 5018 Tampa West Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		29		2014

City	State	Zip Code
Tampa	MO	33634

Amount of Each Disbursement this Period

752.88

Purpose of Disbursement
Palm Cards and StickersCategory/
Type**Transaction ID : SB17.5128**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Varizon Wireless

Mailing Address PO BOX 4002

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		17		2014

City	State	Zip Code
Acworth	GA	30101

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
Cell Phone & Data

001

Category/
Type**Transaction ID : SB17.5159**

Candidate Name

FRIENDS OF JIM EVANS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO District: 07

Full Name (Last, First, Middle Initial)

c. Varizon Wireless

Mailing Address PO BOX 4002

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		23		2014

City	State	Zip Code
Acworth	GA	30101

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
Cell Phone & Data

001

Category/
Type**Transaction ID : SB17.5157**

Candidate Name

FRIENDS OF JIM EVANS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO District: 07

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1352.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

A. Walmart

Mailing Address 1150 US Hwy 60 East

City	State	Zip Code
Republic	MO	65738

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		18		2014

Amount of Each Disbursement this Period

5.41

Transaction ID : SB17.5115

B. Walmart

Mailing Address 1150 US Hwy 60 East

City	State	Zip Code
Republic	MO	65738

Purpose of Disbursement
Popcorn and oil

Candidate Name

FRIENDS OF JIM EVANS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO

District: 07

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

12.79

Transaction ID : SB17.5149

c. Walmart

Mailing Address 1150 US Hwy 60 East

City	State	Zip Code
Republic	MO	65738

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		05		2014

Amount of Each Disbursement this Period

28.99

Transaction ID : SB17.5137

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

47.19

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM EVANS

Full Name (Last, First, Middle Initial)

A. Walmart

Mailing Address 1150 US Hwy 60 East

City	State	Zip Code
Republic	MO	65738

Purpose of Disbursement
Computer Monitor

001

Category/
Type

Candidate Name

FRIENDS OF JIM EVANS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: MO

District: 07

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2014

Amount of Each Disbursement this Period

271.07

Transaction ID : SB17.5178

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

271.07

14562.60

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 19 OF 20

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4130

FRIENDS OF JIM EVANS

LOAN SOURCE Full Name (Last, First, Middle Initial)

James Evans

[PERSONAL FUNDS]

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

6271 S Farm Road 67

City

State

ZIP Code

Republic

MO

65738

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M M / D D / Y Y
01 / 01 / 2014

Date Due

M M / D D / Y Y
/ 1/1/15

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 20 OF 20

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4327

FRIENDS OF JIM EVANS

LOAN SOURCE Full Name (Last, First, Middle Initial)

James Evans

[PERSONAL FUNDS]

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

6271 S Farm Road 67

City

State

ZIP Code

Republic

MO

65738

Original Amount of Loan

40000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

40000.00

TERMS

Date Incurred

M M / D D / Y Y
03 / 07 / 2014

Date Due

M M / D D / Y Y
/ 1/1/15

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

40000.00

TOTALS This Period (last page in this line only)..... ►

45000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.